State of California—Health and Welfare Agency Form Approved OMB No. 2050—0039 (Expires 9-30-91) State of California See instructions on Back of Page 6 Department of Health Services Please print or type. (Form designed for use on elite (12-pitch typewriter). Toxic Substances Control Division and Front of Page 7 Secramento, California UNIFORM HAZARDOUS 1. Generator's US EPA ID No Manifest 2. Page 1 Document No. WASTE MANIFEST Information in the sheded areas CAD, 999 pq1,968 is not required by Federal law. 3. Generator's Name and Mailing Address A. State Manifest Document Number ARMOR ALL 4030 WEST CHANDLER.., SANTA ANA, CA 92704 B. State Generator's 4. Generator's Phone (714 393-1494 1-800-852-7550 5. Transporter 1 Company Name US EPA ID Number C. State Transporter's ID 10 384 698-0991 OMEGA RECOVERY SERVICES GAD 042,245 001 D. Transporter's Phone 213 7. Transporter 2 Company Name US EPA ID Number E State Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address US EPA ID Number G. State Facility's ID CALL OMEGA RECOVERY SERVICES CIAIDIO141212145TOO11 12504 E. WHITTIER BLVD 88677006 RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA WHITTIER, CA 90602 CAD: 042 245:001 213 698-0991 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers 13. Total I. Waste No. Quantity Unit No. Type Wt/Vo HAZARDOUS WASTE LIQUID N.O.S State 212 UN 1993 (WASTE CAR WAX) COMBUSTIBLE LIQUID EPA/Othe F005 State EPA/Other C. State EPA/Other d State EPA/Other J. Additional Descriptions for Materials ListadyAlliov Handling Codes for Wastes Listed Above b. 01 CALL THE NATIONAL C. d. 15. Special Handling Instructions and Additional Information PROFILE NUMBER A13814 16. EMERGENCY OR SPILL, GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. Signature Day 17. Transporter 1 Acknow RANSPORT Z Printed/Typed Name Signature 6 Month Year mengers Printed/Typed Name Signature 19. Discrepancy Indication Space ACI

DHS 8022 A (1/88)

TY

Do Not Write Below This Line

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

FORD

EPA 8700—22 (Rev. 9-88) Previous editions are obsolete.

Printed/Typed Name

White: ISDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS To: P.O. Box 3000, Sacramento, CA 95812

Month

Day

Year

Revised Manifest Summary Report

ARMOR ALL ARMOR ALL

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
05/14/1990		88677006		13761	LBS		CMP		
07/23/1991		88346483		2752	LBS		CMP		
07/23/1991		88346484		14178	LBS		CMP		
07/23/1991		88346485		1376	LBS		CMP		
07/24/1991		88681785		458.7	LBS		CMP		
07/26/1991		88346499		458.7	LBS		CMP		

Total Records: 6

Default Volume: 0

Total Waste Volume: 16.4924